Bill

/3

Received:	09/30/2004				Received By: dk	ennedy	
Wanted: A	As time permi	its			Identical to LRB	:	
For: Adm	inistration-B	udget			By/Representing	: Milioto	
This file r	nay be shown	to any legislato	or: NO		Drafter: dkenne	dy	
May Cont	tact: DHFS				Addl. Drafters:		
Subject:	Health -	long-term car	·e		Extra Copies:		
Submit vi	a email: YES						
Requester	r's email:						
Carbon co	opy (CC:) to:	robin.ryan	@legis.stat	e.wi.us			
Pre Topi	ie:	***************************************					
DOA:	.Milioto, BB00	019 -					
Topic:							
Life Leas	e						
Instructi	ions:						
See Attac	ched; same as 2	2003 AB 920					
Drafting	History:						
Vers.	<u>Drafted</u>	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required
/?	dkennedy 09/30/2004	wjackson 10/15/2004					S&L
/1			jfrantze 10/18/20	04	sbasford 10/18/2004		S&L
/2	dkennedy 01/21/2005	wjackson 01/21/2005	jfrantze 01/21/20	05	mbarman 01/21/2005		S&L
/3	dkennedy	wjackson	rschluet		sbasford		S&L

wjackson

dkennedy

LRB-0344 02/01/2005 04:36:09 PM Page 2

Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	Jacketed	Required
	01/31/2005	01/31/2005	01/31/200)5	01/31/2005		
/4	dkennedy 02/01/2005	wjackson 02/01/2005	pgreensl		mbarman 02/01/2005		
FE Sent l	For:						

<**END**>

Bill

DIII								
Received: 09/30/2004				Received By: dkennedy				
Wanted:	As time permi	its			Identical to LRB:			
For: Ad	ministration-B	udget			By/Representing:	Milioto		
This file may be shown to any legislator: NO May Contact: DHFS					Drafter: dkenned	ly		
					Addl. Drafters:		-	
Subject:	Health -	· long-term ca	re		Extra Copies:			
Submit	via email: YES							
Request	er's email:							
Carbon	copy (CC:) to:	robin.ryan	@legis.state	e.wi.us				
Pre Top	pic:		444			-		
DOA:	Milioto, BB00	019 -						
Topic:								
Life Lea	ise							
Instruc	tions:			and the state of t				
See Atta	ached; same as 2	2003 AB 920						
Draftin	g History:							
Vers.	Drafted	Reviewed	<u>Typed</u>	Proofed	Submitted	Jacketed	Required	
/?	dkennedy 09/30/2004	wjackson 10/15/2004					S&L	
/1			jfrantze 10/18/200	04	sbasford 10/18/2004		S&L	
/2	dkennedy 01/21/2005	wjackson 01/21/2005	jfrantze 01/21/200	05 301	mbarman 01/21/2005		S&L	
12	dkennedy	wiackson	rschluet		sbasford			

LRB-0344 01/31/2005 02:22:35 PM

Page 2

 Vers.
 Drafted
 Reviewed
 Typed
 Proofed
 Submitted
 Jacketed
 Required

 01/31/2005
 01/31/2005
 01/31/2005
 01/31/2005
 01/31/2005
 01/31/2005

FE Sent For:

<**END**>

Received By: dkennedy

2005 DRAFTING REQUEST

1	R	i	1	1
1		1	г	ı

Received: 09/30/2004

Wanted: As time permits				Identical to LRB:			
For: Administration-Budget				By/Representing:	Milioto		
This file n	nay be shown	to any legislato	r: NO		Drafter: dkenned	ly	
May Cont	act: DHFS				Addl. Drafters:		
Subject:	Health -	long-term car	e		Extra Copies:		
Submit via	a email: YES						
Requester	's email:						
Carbon co	py (CC:) to:	robin.ryan(@legis.state	e.wi.us			
Pre Topic	c:						
DOA:	Milioto, BB00)19 -					
Topic:							
Life Lease	e						
Instruction	ons:						
See Attacl	hed; same as 2	2003 AB 920					
Drafting	History:			and the second s			
Vers.	<u>Drafted</u>	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required
/?	dkennedy 09/30/2004	wjackson 10/15/2004					S&L
/1			jfrantze 10/18/200)4	sbasford 10/18/2004		S&L
/2	dkennedy 01/21/2005	wjackson 01/21/2005 /3 WL 3	jfrantze 01/21/200	05	mbarman 01/21/2005		

FE Sent For:

<**END**>

T	• •	ı
K		ŀ
L)	LL.	ij

Received	d: 09/30/2004				Received By: dke	ennedy	
Wanted:	As time perm	its			Identical to LRB:		
For: Administration-Budget				By/Representing:	Milioto		
This file	may be shown	to any legislat	or: NO		Drafter: dkenned	ly	
May Co	ntact: DHFS				Addl. Drafters:		
Subject:	Health	- long-term ca	re		Extra Copies:	RLR	
Submit v	via email: NO						
Pre Top	oic:						
DOA:	Milioto, BB0	019 -					
Topic:			VACABLE ST. 100 ST. 10				
Life Lea	se						
Instruct	tions:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			CHANGE THE COLOR	
See Atta	ched; same as	2003 AB 920					
Draftin	g History:						
<u>Vers.</u>	<u>Drafted</u>	Reviewed	Typed	<u>Proofed</u>	Submitted	<u>Jacketed</u>	Required
/?	dkennedy 09/30/2004	wjackson 10/15/2004					S&L
/1		/2 WLj 1/2/	jfrantze 10/18/200	4	sbasford 10/18/2004		
FE Sent	For:	,	961/21	<end></end>			

20		'n	٦
14	1	ł	п
4 B	ŧ	ı	1
	-	_	

Received: 09/30/2004				Received By: dkennedy				
Wanted: A	As time permi	its			Identical to LRB	:		
For: Adm	inistration-B	udget			By/Representing	: Milioto		
This file r	nay be shown	to any legislate	or: NO		Drafter: dkenned	dy		
May Con	tact: DHFS				Addl. Drafters:			
Subject: Health - long-term care			Extra Copies:	RLR				
Submit vi	ia email: NO							
Pre Topi	c:	A MANAGEMENT CONTRACTOR OF THE						
DOA:	.Milioto, BB0	019 -						
Topic:	- Specific de descriptor							
Life Leas	e							
Instructi	ions:						The second distribution of the second distributi	
See Attac	ched; same as	2003 AB 920						
Drafting	History:			u u ravala vezeranna ive e		WARREST TO THE STATE OF THE STA		
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required	
/?	dkennedy 09/30/2004	lrb_editor						
FE Sent l	For:			<end></end>				

Bill

Received: 09/30/2004

Received By: dkennedy

Wanted: As time permits

Identical to LRB:

For: Administration-Budget

By/Representing: Milioto

This file may be shown to any legislator: NO

Drafter: dkennedy

May Contact: DHFS

Addl. Drafters:

Subject:

Health - long-term care

Extra Copies:

DHFS, RLR

Submit via email: NO

Pre Topic:

DOA:.....Milioto, BB0019 -

Topic:

Life Lease

Instructions:

See Attached; same as 2003 AB 920

Drafting History:

Vers.

Drafted

Reviewed

<u>Typed</u>

Proofed

Submitted

Jacketed

Required

/?

dkennedy

1 WLJ 10/15 \$ 10/18

<END>

FE Sent For:

2003-05 Budget Bill Statutory Language Drafting Request

Topic:

Life Lease

Tracking Code:

SBO team:

Health and Insurance

SBO analyst:

Steve Milioto

Phone:

266-8593

Email:

steve.milioto@doa.state.wi.us

Agency acronym: DHFS

Agency number: 435

DHFS

Department of Health and Family Services 2005-2007 Biennial Budget Statutory Language Request September 21, 2004

Life Lease

Current Language

Section 46.277 governs the CIP II program, the MA Home and Community Based Waiver program for frail elders and people with disabilities who relocate from nursing homes to the community.

Proposed Change

Adopt the provisions of 2003 Assembly Bill 920

Effect of the Change

The change would enable the Department to implement Life Lease, an expansion of the CIP II waiver program for adults who are elderly or physically disabled. Under Life Lease, CIP II funding would be available to counties for all nursing home residents who wish to relocate to the community, without the requirement that the nursing home bed close. The Life Lease funding would be available for as long as the relocated individual uses community based long term care. Counties would no longer receive Life Lease funding for a person after the person dies or returns to a nursing home.

Rationale for the Change

Under current law, the Department can create a new permanent CIP II "slot" for a person who relocates from a nursing home to the community. The slot is funded with transfers from the MA nursing home budget. However, the nursing home bed the person occupied must be delicensed in order for the slot to be created.

Through Life Lease, the Department will be able to make funding available for any individual who wishes to relocate from a nursing home to the community, regardless of whether a nursing home bed is delicensed.

As of July 2004, there were 492 elderly and physically disabled individuals in institutions who have expressed a desire to live in a community setting and were on waiting lists for community long term care programs. The Department projects that counties will be able to relocate 315

individuals from nursing homes to the community in the 2005-2007 biennium under Life Lease.

Life Lease will generate cost savings to the MA budget because community care for relocated individuals is on average less expensive than institutional care. The estimated savings will equal (\$258,100) GPR in FY 06 and (\$711,300) GPR in FY 07.

Desired Effective Date:

Upon passage

Agency:

DHFS

Agency Contact:

Andy Forsaith

Phone:

266-7684

Date (time) needed

SOON- In edit

DOA BUDGET DRAFT

Use the appropriate components and routines developed for bills.

>>FOR 2005-07 BUDGET — NOT READY FOR INTRODUCTION<<

AN ACT ... [DO NOT generate catalog]; relating to: the budget

Analysis by the Legislative Reference Bureau

If titles are needed in the analysis, in the component bat

For the main heading, execute: $create \rightarrow anal: \rightarrow title: \rightarrow head$

For the subheading, execute: create o anal: o title: o sub

For the analysis text, in the component bar:

For the text paragraph, execute: $create \rightarrow enal: \rightarrow text$

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION #.

.STET

LRB-4038/1 DAK:jld:pg

2003 ASSEMBLY BILL 920

heading + (5) MEDICAL ASSISTANCE

March 2, 2004 7 Introduced by Representatives Pope-Roberts Krusick, Boyle, Maller, Berceau Young and Vruwink, cosponsored by Senators Hansen and Jauch. Referred to Joint Committee on Finance.

1 AN ACT to renumber 46.277 (1m) (a); to amend 46.277 (1), 46.277 (2) (intro.),

46.277 (3) (a), 46.277 (3) (b) 1., 46.277 (3) (b) 2., 46.277 (4) (a), 46.277 (4) (b),

46.277 (5) (g) and 46.277 (5g) (a); and to create 46.277 (1m) (ag) and 46.277 (4)

(c) of the statutes; relating to provision of home and community-based services under a community integration program to persons relocated from facilities, during the period of the relocation.

Analysis by the Legislative Reference Bureau

Currently, the Department of Health and Family Services (DHFS) administers a Community Integration Program (commonly known as "CIP II"), under which Medical Assistance (MA) moneys are paid to counties to provide home and community-based services, under a waiver of federal Medicaid laws, to elderly and physically disabled persons who meet the level of care requirements for MA-reimbursed nursing home care or are relocated from facilities. DHFS must establish a uniform daily rate for CIP II and reimburse counties up to that rate for each person enrolled in CIP II. Under 2003 Wisconsin Act 33 (the biennial budget DHFS may provide enhanced reimbursement for CIP II services for a person who is relocated to the community from a nursing home by a county after July 16, 2003, if the nursing home bed used by the person is delicensed upon the person's relocation.

This bill authorizes DHFS to provide CIP II funding for home and community-based services to an MA-eligible person who relocates from a facility to

the community. Reimbursement is not conditioned on delicensure of a nursing home bed upon the person's relocation. The funding begins on the date of the relocation and ends on the date that the person discontinues program participation or no longer meets the level of care requirements for MA reimbursement in a nursing home. Funding in the aggregate for these relocated persons may not exceed the total MA costs for the persons if served in nursing homes. DHFS may provide an enhanced reimbursement rate for the services. The total number of persons who may participate in this particular aspect of CIP II is not restricted by limitations on numbers participating in the remainder of CIP II.

For further information see the state and local fiscal estimate, which will be

printed as an appendix to this bill.

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.277 (1) of the statutes is amended to read:

46.277 (1) Legislative intent. The intent of the program under this section is to provide home or community—based care to serve in a noninstitutional community setting a person who meets eligibility requirements under 42 USC 1396n (c) and is relocated from an institution other than a state center for the developmentally disabled or meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, except that the number of persons who receive home or community—based care under this section is not intended, other than under sub. (4) (c), to exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. The intent of the program is also that counties use all existing services for providing care under this section, including those services currently provided by counties.

SECTION 2. 46.277 (1m) (a) of the statutes is renumbered 46.277 (1m) (ak).

Section 3. 46.277 (1m) (ag) of the statutes is created to read:

46.277 (1m) (ag) "Delicensed" means deducted from the number of beds stated on a facility's license, as specified under s. 50.03 (4) (e).

SECTION 4. 46.277 (2) (intro.) of the statutes is amended to read:

46.277 (2) Departmental powers and duties. (intro.) The department may request a waiver from the secretary of the federal department of health and human services, under 42 USC 1396n (c), authorizing the department to serve medical assistance recipients, who meet the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, in their communities by providing home or community-based services as part of medical assistance. The Except under sub. (4) (c), the number of persons for whom the waiver is requested may not exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. If the department requests a waiver, it shall include all assurances required under 42 USC 1396n (c) (2) in its request. If the department receives this waiver, it may request one or more 3-year extensions of the waiver under 42 USC 1396n (c) and shall perform the following duties:

Section 5. 46.277 (3) (a) of the statutes is amended to read:

46.277 (3) (a) Sections 46.27 (3) (b) and 46.275 (3) (a) and (c) to (e) apply to county participation in this program, except that services provided in the program shall substitute for care provided a person in a skilled nursing facility or intermediate care facility who meets the level of care requirements for medical assistance reimbursement to that facility rather than for care provided at a state center for the developmentally disabled. The Except in sub. (4) (c), the number of persons who receive services provided by the program under this paragraph may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b),

that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 6. 46.277 (3) (b) 1. of the statutes is amended to read:

46.277 (3) (b) 1. If Except under sub. (4) (c), if the provision of services under this section results in a decrease in the statewide nursing home bed limit under s. 150.31 (3), the facility affected by the decrease shall submit a plan for delicensing all or part of the facility that is approved by the department.

SECTION 7. 46.277 (3) (b) 2. of the statutes is amended to read:

46.277 (3) (b) 2. Each county department participating in the program shall provide home or community-based care to persons eligible under this section, except that the number of persons who receive home or community-based care under this section may not exceed, other than under sub. (4) (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 8. 46.277 (4) (a) of the statutes is amended to read:

46.277 (4) (a) Any medical assistance recipient who meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility is eligible to participate in the program, except that the number of participants may not exceed, other than under par. (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department. Such a recipient may apply, or any person may apply on behalf of such a recipient, for participation in the program. Section 46.275 (4) (b) applies to participation in the program.

Section 9. 46.277 (4) (b) of the statutes is amended to read:

46.277 (4) (b) To the extent authorized under 42 USC 1396n and except under par. (c), if a person discontinues participation in the program, a medical assistance recipient may participate in the program in place of the participant who discontinues if that recipient meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility, except that the number of participants may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

Section 10. 46.277 (4) (c) of the statutes is created to read:

46.277 (4) (c) The department may, under this paragraph, provide funding under this section for services for a medical assistance recipient who relocates from a facility to the community, beginning on the date of the relocation and ending on the date that the individual discontinues participation in the program or no longer meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility. Funding for medical assistance costs for individuals relocated under this paragraph may not exceed, in the aggregate, total medical assistance costs for the individuals if served in facilities. The total number of individuals who may participate in the program under this paragraph is not restricted by any otherwise applicable limitation on the number of individuals who may participate in the program under this section.

SECTION 11. 46.277 (5) (g) of the statutes, as created by 2003 Wisconsin Act 33, is amended to read:

46.277 (5) (g) The department may provide enhanced reimbursement for services provided under this section to an individual who is relocated to the community from a nursing home by a county department on or after July 26, 2003,

1

2

3

4

5

6

7

8

9

department.

if the nursing home bed that was used by the individual is delicensed upon relocation
of the individual or if the individual is relocated under sub. (4) (c). The department
shall develop and utilize a formula to determine the enhanced reimbursement rate.
Section 12. 46.277 (5g) (a) of the statutes is amended to read:
46.277 (5g) (a) The Except under sub. (4) (c), the number of persons served
under this section may not exceed the number of nursing home beds that are
delicensed as part of a plan submitted by the facility and approved by the

(END)

STATE OF WISCONSIN – **LEGISLATIVE REFERENCE BUREAU** – LEGAL SECTION (608–266–3561)

Vailos From Stone Milioto: 0344
Reuse draft; when person in n. h. is relocated to community, bed must be reserved for that person's potential future use until person dies.
La resultation de la la resultation de la result
to commanding, sea mass of passages of
that person's potential future use until
peron des.

Kennedy, Debora

From:

Milioto, Steve

Sent:

Friday, January 21, 2005 8:50 AM

To: Cc: Kennedy, Debora Johnston, James

Subject:

Draft 344

Importance:

High

Hi Debora --

I have a last minute change for you in regard to draft 344.

The Governor hates the Life Lease concept and name. So, the only change he wants is to reduce a bed when a person relocated to the community under CIP II <u>dies</u>. In effect, this would mean a reduction in the statewide bed cap each year (dependent, of course, on whether relocations continue at a steady clip or not.)

Please revise draft 344 to reflect this idea. Feel free to give me a call about this. Best, Steve



2

3

State of Misconsin 2005 - 2006 LEGISLATURE

LRB-0344/₺~ DAK:wlj:

DOA:.....Milioto, BB0019 - Life Lease

FOR 2005-07 BUDGET -- NOT READY FOR INTRODUCTION



DO NOT GEN AN ACT ...; relating to: provision of home and community-based services under a community integration program to persons relocated from facilities, during the period of the relocation.

Analysis by the Legislative Reference Bureau **HEALTH AND HUMAN SERVICES**

MEDICAL ASSISTANCE

Currently, DHFS administers a Community Integration Program (commonly known as "CIP II"), under which Medical Assistance (MA) moneys are paid to counties to provide home and community-based services, under a waiver of federal Medicaid laws, to elderly and physically disabled persons who meet the level of care requirements for MA-reimbursed nursing home care or are relocated from facilities. DHFS must establish a uniform daily rate for CIP II and reimburse counties up to that rate for each person enrolled in CIP II. DHFS may provide enhanced reimbursement for CIP II services for a person who is relocated to the community from a nursing home by a county if the nursing home bed used by the person is delicensed upon the person's relocation.

This bill authorizes DHFS to provide CIP II funding for home and community-based services to an MA-eligible person who relocates from a facility to the community. Reimbursement is not conditioned on delicensure of a nursing home bed upon the person's relocation The funding begins on the date of the relocation

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

and ends on the date that the person discontinues program participation or no longer meets the level of care requirements for MA reimbursement in a nursing home. Funding in the aggregate for these relocated persons may not exceed the total MA costs for the persons if served in nursing homes. DHFS may provide an enhanced reimbursement rate for the services. The total number of persons who may participate in this particular aspect of CIP II is not restricted by limitations on numbers participating in the remainder of CIP II.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.277 (1) of the statutes is amended to read:

46.277 (1) LEGISLATIVE INTENT. The intent of the program under this section is to provide home or community—based care to serve in a noninstitutional community setting a person who meets eligibility requirements under 42 USC 1396n (c) and is relocated from an institution other than a state center for the developmentally disabled or meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, except that the number of persons who receive home or community—based care under this section is not intended, other than under sub. (4) (c), to exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. The intent of the program is also that counties use all existing services for providing care under this section, including those services currently provided by counties.

SECTION 2. 46.277 (1m) (a) of the statutes is renumbered 46.277 (1m) (ak).

SECTION 3. 46.277 (1m) (ag) of the statutes is created to read:

46.277 (1m) (ag) "Delicensed" means deducted from the number of beds stated on a facility's license, as specified under s. 50.03 (4) (e).

SECTION 4. 46.277 (2) (intro.) of the statutes is amended to read:

46.277 (2) Departmental powers and duties. (intro.) The department may request a waiver from the secretary of the federal department of health and human services, under 42 USC 1396n (c), authorizing the department to serve medical assistance recipients, who meet the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, in their communities by providing home or community-based services as part of medical assistance. The Except under sub. (4) (c), the number of persons for whom the waiver is requested may not exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. If the department requests a waiver, it shall include all assurances required under 42 USC 1396n (c) (2) in its request. If the department receives this waiver, it may request one or more 3-year extensions of the waiver under 42 USC 1396n (c) and shall perform the following duties:

SECTION 5. 46.277 (3) (a) of the statutes is amended to read:

46.277 (3) (a) Sections 46.27 (3) (b) and 46.275 (3) (a) and (c) to (e) apply to county participation in this program, except that services provided in the program shall substitute for care provided a person in a skilled nursing facility or intermediate care facility who meets the level of care requirements for medical assistance reimbursement to that facility rather than for care provided at a state center for the developmentally disabled. The Except in sub. (4) (c), the number of persons who receive services provided by the program under this paragraph may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 6.	46.277 (3) (1	o) 1.	of the	statutes	is	amended	to	read:
------------	---------------	-------	--------	----------	----	---------	----	-------

46.277 (3) (b) 1. If Except under sub. (4) (c), if the provision of services under this section results in a decrease in the statewide nursing home bed limit under s. 150.31 (3), the facility affected by the decrease shall submit a plan for delicensing all or part of the facility that is approved by the department.

SECTION 7. 46.277 (3) (b) 2. of the statutes is amended to read:

46.277 (3) (b) 2. Each county department participating in the program shall provide home or community-based care to persons eligible under this section, except that the number of persons who receive home or community-based care under this section may not exceed, other than under sub. (4) (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

Section 8. 46.277 (4) (a) of the statutes is amended to read:

46.277 (4) (a) Any medical assistance recipient who meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility is eligible to participate in the program, except that the number of participants may not exceed, other than under par. (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department. Such a recipient may apply, or any person may apply on behalf of such a recipient, for participation in the program. Section 46.275 (4) (b) applies to participation in the program.

SECTION 9. 46.277 (4) (b) of the statutes is amended to read:

46.277 (4) (b) To the extent authorized under 42 USC 1396n and except under par. (c), if a person discontinues participation in the program, a medical assistance

11)

INSER 5-13

recipient may participate in the program in place of the participant who discontinues if that recipient meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility, except that the number of participants may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 10. 46.277 (4) (c) of the statutes is created to read:

46.277 (4) (c) The department may, under this paragraph, provide funding under this section for services for a medical assistance recipient who relocates from a facility to the community, beginning on the date of the relocation and ending on the date that the individual discontinues participation in the program or no longer meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility. Funding for medical assistance costs for individuals relocated under this paragraph may not exceed, in the aggregate, total medical assistance costs for the individuals if served in facilities. The total number of individuals who may participate in the program under this paragraph is not restricted by any otherwise applicable limitation on the number of individuals who may participate in the program under this section.

SECTION 11. 46.277 (5) (g) of the statutes is amended to read:

46.277 (5) (g) The department may provide enhanced reimbursement for services provided under this section to an individual who is relocated to the community from a nursing home by a county department on or after July 26, 2003, if the nursing home bed that was used by the individual is delicensed upon relocation of the individual or if the individual is relocated under sub. (4) (c). The department shall develop and utilize a formula to determine the enhanced reimbursement rate.

2

3

4

5

6

SECTION 12. 46.277 (5g) (a) of the statutes is amended to read:
46.277 (5g) (a) The Except under sub. (4) (c), the number of persons served
under this section may not exceed the number of nursing home beds that are
delicensed as part of a plan submitted by the facility and approved by the
department.
(END)

(INSERT 5-13)
(w#) A nursing home bed corresponding to the
bed that was used by the individual shall
be reserved by the vursing home for
Hu individual 1/3 potential future use Olipon
the death of the individual, the bed shall
be devenised by the departments

Life Lease Statutory Change

Proposed Statutory Change:

Step 1: Withdraw Life Lease changes in DHFS Request (LRB-0344)

Step 2: Make the following change to current law s. 46.277(5)(g):

46,277(5)(g) The department may provide enhanced reimbursement for services provided under this section to an individual who is relocated to the community from a nursing home bed by a county department on or after July 26, 2003, if the nursing home bed that was used by the individual is delicensed upon relocation of the individual as long as the number of people served under this section does not exceed the number of nursing home beds that have been delicensed. The Department shall develop and utilize a formula to determine the enhanced reimbursement rate.

are / under

facilities and facili

Kennedy, Debora

From:

Milioto, Steve

Sent:

Friday, January 28, 2005 3:14 PM

To: Cc:

Kennedy, Debora Johnston, James

Subject:

FW: Life Lease Stat language

Importance:

High



Language Gov's...

Hi Debora --

I hesitate to ask but is it too late to make the change contained in the attachment below? This would be for draft 344. All DHFS and DOA requested changes prior to the one contained below would no longer apply.

I am extremely apologetic for the last minute nature of this and will certainly understand if this has to appear as an errata on our part. Best, Steve

----Original Message----

From: Forsaith, Andrew

Sent: Friday, January 28, 2005 2:28 PM To: Johnston, James; Milioto, Steve Subject: Life Lease Stat language

Kennedy, Debora

From:

Johnston, James

Sent:

Monday, January 31, 2005 2:19 PM

To:

Bove, Fredi-Ellen; Forsaith, Andrew Milioto, Steve; Kennedy, Debora

Cc: Subject:

FW: CIP II language

We are also planning to update the applicability date for the new language so that the enhanced rate for relocations, under the changes we are making to s. 46.277(5)(g), applies to relocations that take place after the effective date of the bill.

----Original Message----

From: Johnston, James

Sent: Monday, January 31, 2005 1:50 PM

To: Cc: Forsaith, Andrew Bove, Fredi-Ellen

Subject:

CIP II language

As long at the number of people served under this section does not exceed the number of nursing home beds that have been delicensed as part of plans submitted by facilities and approved by the department.

2

3

DOA:.....Milioto, BB0019 - Life Lease

FOR 2005-07 BUDGET -- NOT READY FOR INTRODUCTION

Do Not Gen

AN ACT ...; relating to: provision of home and community based services under

a community integration program to persons relocated from facilities, during

the period of the relocation.

The budget

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHFS administers a Community Integration Program (commonly known as "CIP II"), under which Medical Assistance (MA) moneys are paid to counties to provide home and community-based services, under a waiver of federal Medicaid laws, to elderly and physically disabled persons who meet the level of care requirements for MA-reimbursed nursing home care or who are relocated from facilities. DHFS must establish a uniform daily rate for CIP II and reimburse counties up to that rate for each person enrolled in CIP II. DHFS may provide enhanced reimbursement for CIP II services for a person who is relocated to the community from a nursing home by a county if the nursing home bed used by the person is delicensed upon the person's relocation.

This bill authorizes DHFS to provide CIP II funding for home and community-based services to an MA-eligible person who relocates from a facility to the community. Reimbursement is not conditioned on delicensure of a nursing home bed upon the person's relocation; rather, the nursing home must reserve a bed for

delicensed as part of plans submitted by mersing homes and approved

 $\mathbf{2}$

3

4

5

6

7

8

9

10

11

12

13

14

15

potential future use by the relocated person. At the death of the person, DHFS must delicense the nursing home bed. The funding begins on the date of the relocation and ends on the date that the person discontinues program participation or no longer meets the level of care requirements for MA reimbursement in a nursing home. Funding in the aggregate for these relocated persons may not exceed the total MA costs for the persons if served in nursing homes. DHFS may provide an enhanced reimbursement rate for the services. The total number of persons who may participate in this particular aspect of CIP II is not restricted by limitations on numbers participating in the remainder of CIP II.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.277 (1) of the statutes is amended to read:

46.277 (1) Legislative intent. The intent of the program under this section is to provide home or community-based care to serve in a noninstitutional community setting a person who meets eligibility requirements under 42 USC 1396n (c) and is relocated from an institution other than a state center for the developmentally disabled or meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, except that the number of persons who receive home or community-based care under this section is not intended, other than under sub. (4) (c), to exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. The intent of the program is also that counties use all existing services for providing care under this section, including those services currently provided by counties.

SECTION 2. $46.27\sqrt{(1\text{m})}$ (a) of the statutes is renumbered $46.2\sqrt[3]{(1\text{m})}$ (ak).

SECTION 3. 46.277 (1m) (ag) of the statutes is created to read:

46.277 (1m) (ag) "Delicensed" means deducted from the number of beds stated on a facility's license, as specified under s. 50.03 (4) (e).

SECTION 4. 46.277 (2) (intro.) of the statutes is amended to read:

46.277 (2) Departmental powers and duties. (intro.) The department may request a waiver from the secretary of the federal department of health and human services, under 42 USC 1396n (c), authorizing the department to serve medical assistance recipients, who meet the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility, in their communities by providing home or community—based services as part of medical assistance. The Except under sub. (4) (c), the number of persons for whom the waiver is requested may not exceed the number of nursing home beds that are delicensed as part of a plan submitted by the facility and approved by the department. If the department requests a waiver, it shall include all assurances required under 42 USC 1396n (c) (2) in its request. If the department receives this waiver, it may request one or more 3—year extensions of the waiver under 42 USC 1396n (c) and shall perform the following duties:

SECTION 5. 46.277 (3) (a) of the statutes is amended to read:

46.277 (3) (a) Sections 46.27 (3) (b) and 46.275 (3) (a) and (c) to (e) apply to county participation in this program, except that services provided in the program shall substitute for care provided a person in a skilled nursing facility or intermediate care facility who meets the level of care requirements for medical assistance reimbursement to that facility rather than for care provided at a state center for the developmentally disabled. The Except in sub. (4) (c), the number of persons who receive services provided by the program under this paragraph may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b),

that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 6. 46.27% (3) (b) 1. of the statutes is amended to/read:

46.277 (3) (b) 1. If Except under sub. (4) (c), if the provision of services under this section results in a decrease in the statewide nursing home bed limit under s. 150.31 (3), the facility affected by the decrease shall submit a plan for delicensing all or part of the facility that is approved by the department.

SECTION 7. 46.277 (3) (b) 2, of the statutes is amended to read:

46.277 (3) (b) 2. Each county department participating in the program shall provide home or community-based care to persons eligible under this section, except that the number of persons who receive home or community-based care under this section may not exceed, other than under sub. (4) (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 8. 46.277 (4) (a) of the statutes is amended to read:

46.277 (4) (a) Any medical assistance recipient who meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility is eligible to participate in the program, except that the number of participants may not exceed, other than under par. (c), the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department. Such a recipient may apply, or any person may apply on behalf of such a recipient, for participation in the program. Section 46.275 (4) (b) applies to participation in the program.

SECTION 9. 46.277 (4) (b) of the statutes is amended to read:

46.277 (4) (b) To the extent authorized under 42 USC 1396n and except under par. (c), if a person discontinues participation in the program, a medical assistance recipient may participate in the program in place of the participant who discontinues if that recipient meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or intermediate care facility, except that the number of participants may not exceed the number of nursing home beds, other than beds specified in sub. (5g) (b), that are delicensed as part of a plan submitted by the facility and approved by the department.

SECTION 10. 46.277 (4) (c) of the statutes is created to read:

46.277 (4) (c) The department may, under this paragraph, provide funding under this section for services for a medical assistance recipient who relocates from a facility to the community, beginning on the date of the relocation and ending on the date that the individual dies, discontinues participation in the program, or no longer meets the level of care requirements for medical assistance reimbursement in a skilled nursing facility or an intermediate care facility. A nursing home bed corresponding to the bed that was used by the individual shall be reserved by the nursing home for the individual's potential future use. Upon the death of the individual, the bed shall be delicensed by the department. Funding for medical assistance costs for individuals relocated under this paragraph may not exceed, in the aggregate, total medical assistance costs for the individuals if served in facilities. The total number of individuals who may participate in the program under this paragraph is not restricted by any otherwise applicable limitation on the number of individuals who may participate in the program under this paragraph.

12	(END)
1.1	department.
10	delicensed as part of a plan submitted by the facility and approved by the
9/	under this section may not exceed the number of nursing home beds that are
8	46.277 (5g) (a) The Except under sub. (4) (c), the number of persons served
7	SECTION 12. 46.277 (5g) (a) of the statutes is amended to read:
6	shall develop and utilize a formula to determine the enhanced reimbursement rate.
5	of the individual artifthe individual is relocated under sub. (4) to The department
4	if the nursing home bed that was used by the individual is delicensed upon relocation
3	community from a nursing home by a county department on or after July 26, 2003,
2	services provided under this section to an individual who is relocated to the
1	46.277 (5) (g) The department may provide enhanced reimbursement for

number of individuals served under this
section does not exceed the number
of nursing home be do that are delicensed
as part of plans Submitted by nursing
as part of plans Submitted by nursing
homes and approved by the department

the effective date

The paragraph ... Trusor userts date

Kennedy, Debora

From:

Milioto, Steve

Sent:

Tuesday, February 01, 2005 2:29 PM Johnston, James; Kennedy, Debora

To: Subject:

Community Relocations draft

Importance:

High

Jim and Debora --

I was rereading draft 344 this afternoon. I'm less certain today than I was yesterday about the enhanced reimbursement and how it will work for those relocations that have occurred since July 26, 2003.

Since the draft now refers to the effective date of the bill and deletes the July 26, 2003 reference, the post-July 26, 2003/pre-effective date relocations that enjoy enhanced reimbursement may fall into a kind of limbo where there is no governing language for these relocations.

I guess I would feel more comfortable if we specified in 46.277(5)(g) that relocations made with the enhanced reimbursement after July 26, 2003 but before the effective date of the bill would still be able to enjoy the enhanced reimbursement.

If it's not too late to make this change, I would like to make it. If not, this may be a candidate for the errata list. Best, Steve

2/1/05: From Steve Milioto; they decided not to make this change.

DAK: word "section" should be changed to "paragraph"; Steve agreed



State of Misconsin 2005 - 2006 LEGISLATURE

LRB-0344/3 4 DAK:wlj:rs

DOA:.....Milioto, BB0019 - Life Lease

FOR 2005-07 BUDGET -- NOT READY FOR INTRODUCTION



Do Not Gen

AN ACT ...: relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHFS administers a Community Integration Program (commonly known as "CIP II"), under which Medical Assistance (MA) moneys are paid to counties to provide home and community—based services, under a waiver of federal Medicaid laws, to elderly and physically disabled persons who meet the level of care requirements for MA—reimbursed nursing home care or who are relocated from facilities. DHFS must establish a uniform daily rate for CIP II and reimburse counties up to that rate for each person enrolled in CIP II. DHFS may provide enhanced reimbursement for CIP II services for a person who is relocated to the community from a nursing home by a county if the nursing home bed used by the person is delicensed upon the person's relocation.

This bill authorizes DHFS to provide enhanced CIP II funding for home and community-based services to an MA-eligible person who relocates from a facility to the community, if the number of persons served does not exceed the number of nursing home beds delicensed as part of plans submitted by nursing homes and approved by DHFS.

2

3

4

5

6

7

8

9

10

11

12

13

14

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.277 (1m) (ag) of the statutes is created to read:

46.277 (1m) (ag) "Delicensed" means deducted from the number of beds stated on a facility's license, as specified under s. 50.03 (4) (e).

SECTION 2. 46.277 (5) (g) of the statutes is amended to read:

46.277 (5) (g) The department may provide enhanced reimbursement for services provided under this section to an individual who is relocated to the community from a nursing home by a county department on or after July 26, 2003 the effective date of this paragraph [revisor inserts date], if the nursing home bed that was used by the individual is delicensed upon relocation of the individual number of individuals served under this section does not exceed the number of nursing home beds that are delicensed as part of plans submitted by nursing homes and approved by the department. The department shall develop and utilize a formula to determine the enhanced reimbursement rate.

(END)



State of Misconsin 2005 - 2006 LEGISLATURE

LRB-0344/4 DAK:wlj:pg

DOA:.....Milioto, BB0019 - Life Lease

FOR 2005-07 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHFS administers a Community Integration Program (commonly known as "CIP II"), under which Medical Assistance (MA) moneys are paid to counties to provide home and community—based services, under a waiver of federal Medicaid laws, to elderly and physically disabled persons who meet the level of care requirements for MA—reimbursed nursing home care or who are relocated from facilities. DHFS must establish a uniform daily rate for CIP II and reimburse counties up to that rate for each person enrolled in CIP II. DHFS may provide enhanced reimbursement for CIP II services for a person who is relocated to the community from a nursing home by a county if the nursing home bed used by the person is delicensed upon the person's relocation.

This bill authorizes DHFS to provide enhanced CIP II funding for home and community-based services to an MA-eligible person who relocates from a facility to the community, if the number of persons served does not exceed the number of nursing home beds delicensed as part of plans submitted by nursing homes and approved by DHFS.

2

3

4

5

6

7

8

9

10

11

12

13

14

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.277 (1m) (ag) of the statutes is created to read:

46.277 (1m) (ag) "Delicensed" means deducted from the number of beds stated on a facility's license, as specified under s. 50.03 (4) (e).

SECTION 2. 46.277 (5) (g) of the statutes is amended to read:

46.277 (5) (g) The department may provide enhanced reimbursement for services provided under this section to an individual who is relocated to the community from a nursing home by a county department on or after July 26, 2003 the effective date of this paragraph [revisor inserts date], if the nursing home bed that was used by the individual is delicensed upon relocation of the individual number of individuals served under this paragraph does not exceed the number of nursing home beds that are delicensed as part of plans submitted by nursing homes and approved by the department. The department shall develop and utilize a formula to determine the enhanced reimbursement rate.

(END)